

STATE REPORT 11.01.2020 Issue 20

### SUMMARY

- Illinois is seeing an unrelenting rise in cases and test positivity over the last four weeks that will continue to lead to increasing
  hospitalizations and deaths; a pivot to additional mitigation strategies is needed. The rise in test positivity, hospitalizations, and deaths
  confirm rapidly increasing disease activity, while testing has increased in response. Illinois is in the red zone for cases, indicating 101 or more
  new cases per 100,000 population, with the 12th highest rate in the country. Illinois is in the orange zone for test positivity, indicating a rate
  between 8.0% and 10.0%, with the 21st highest rate in the country.
- Illinois has seen an increase in new cases and an increase in test positivity despite increasing test volumes. Hospitalizations continued to increase and have doubled in four weeks, reaching a level last seen June 1.
- High viral transmission is widely distributed throughout Illinois. The following three counties had the highest number of new cases over the last 3 weeks: 1. Cook County, 2. DuPage County, and 3. Will County. These counties represent 50.0% of new cases in Illinois.
- 88% of all counties in Illinois have moderate or high levels of community transmission (yellow, orange, or red zones), with 48% having high levels of community transmission (red zone). 10 of the 11 state health districts will be under increased mitigation measures due to worsening epidemic trends.
- Institutions of higher education: UIUC reported a near doubling in test positivity in the last week.
- During the week of Oct 19 Oct 25, 15% of nursing homes had at least one new resident COVID-19 case, 34% had at least one new staff COVID-19 case, and 5% had at least one new resident COVID-19 death.
- Illinois had 303 new cases per 100,000 population, compared to a national average of 165 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 64 to support operations activities from FEMA; 5 to support operations activities from ASPR; 2 to support epidemiology activities from CDC; and 7 to support operations activities from LISCG.
- Between Oct 24 Oct 30, on average, 320 patients with confirmed COVID-19 and 520 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Illinois. An average of 93% of hospitals reported either new confirmed or new suspected COVID patients each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.

### RECOMMENDATIONS

- As you can see from the time sequence of maps at the back of your packet, there is a continued increase in cases, hospitalizations, and fatalities nationally, spreading southward from the coldest climates as the population moves indoors and cases increase exponentially. These maps demonstrate the previous impact of comprehensive mitigation efforts when implemented effectively in many areas and that partial or incomplete mitigation leads to prolonged community spread, hospitalizations, and increased fatalities.
- We share the strong concern of Illinois leaders that the current situation is worsening dramatically and that there is a limited time window to
  prevent further cases and avoid increases in hospitalizations and deaths. The Governor's continued personal guidance on these measures is
  critical and is commended.
- Illinois has had considerable success in limiting morbidity and mortality using the adaptive adjustment of mitigation measures in response to changes in incidence. At this point, the rapid increase in cases and test positivity throughout the state indicates that additional measures should be taken, in addition to expeditious upward adjustment of mitigation to avoid falling behind the rapid spread. Additional measures should include communications to reinforce messaging around social gatherings and a new asymptomatic surveillance approach.
- Movement to the mitigation level recommended under the state plan associated with the current level of disease activity is recommended; given the trajectory of disease activity, efforts to be keep less intense mitigation levels are unlikely to succeed. Local authorities should support the mitigation measures to avoid preventable hospitalizations and deaths, as initiating appropriate levels of mitigation now will allow for earlier control of disease and earlier resumption of business activity than a lagging upward adjustment.
- Communication from state, local, and community leaders of a clear and shared message asking Illinoisans to wear masks, physically
  distance, and avoid gatherings, especially indoors, is needed. Hospital personnel are frequently trusted in the community and have been
  successfully recruited to amplify these messages locally. The "It Only Works If You Wear It" campaign is noted and commended. Hospital
  personnel are frequently trusted in the community and have been successfully recruited to amplify these messages locally.
- Continue to use testing and case investigations strategically to identify and mitigate areas of increasing disease activity and transmission venues. In addition to testing symptomatic individuals and their contacts, devote resources to rapidly increase surveillance for silent community spread. Given their ease of use at sites, the Abbott BinaxNOW or other antigen tests should be used to augment nucleic acid testing (NAT) and allow for implementation of weekly repeat surveillance in critical populations to monitor degree of asymptomatic community spread. Information from the cases identified and available wastewater surveillance data should be used to identify high transmission zip codes or venues for additional testing. In these high transmission localities, work with local communities and businesses to maximize testing for asymptomatic spread, especially among 18-35 year olds, potentially including incentives.
- Community spread continues at social and family gatherings where observance of social distancing and mask wearing is not followed due to people assuming that "healthy" family members and friends are not infected with COVID since they do not have symptoms. Highly infectious asymptomatic COVID individuals then cause ongoing transmission, frequently infecting multiple people in a single gathering.
- All antigen results must be reported with both the number of positive results and total tests conducted; positives must be reported as COVID
  cases. Confirmation of positives identified by antigen testing among asymptomatic individuals with NAT is ideal; however, given the high and
  increasing rates of disease transmission, the positive predictive value of an antigen test is increased as well.
- Ensure all K-12 schools are following CDC guidelines, including mask wearing, and utilizing the Abbott BinaxNOW tests to routinely test all
  teachers as another indicator of the degree of community spread to further increase mitigation efforts.
- Ensure university students continue their mitigation behaviors to ensure no further outbreaks on or off campus as symptomatic cases and cases identified through surveillance testing decline. Encourage institutions of higher education to test their student body before they leave campus for Thanksgiving break to mitigate exposure to family and community.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.





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	STATE	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION	UNITED STATES
NEW COVID-19 CASES (RATE PER 100,000)	38,365 (303)	+38%	144,919 (276)	542,805 (165)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	8.9%	+1.7%*	8.6%	6.7%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)			1,590,603** (3,027**)	7,430,977** (2,264**)
COVID-19 DEATHS (RATE PER 100,000)	295 (2.3)	+17%	1,132 (2.2)	5,623 (1.7)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	15%	+1%*	15%	13%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	34%	+3%*	33%	26%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	5%	+1%*	5%	4%

**DATA SOURCES** – Additional data details available under METHODS

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 10/30/2020; previous week is 10/17 - 10/23.

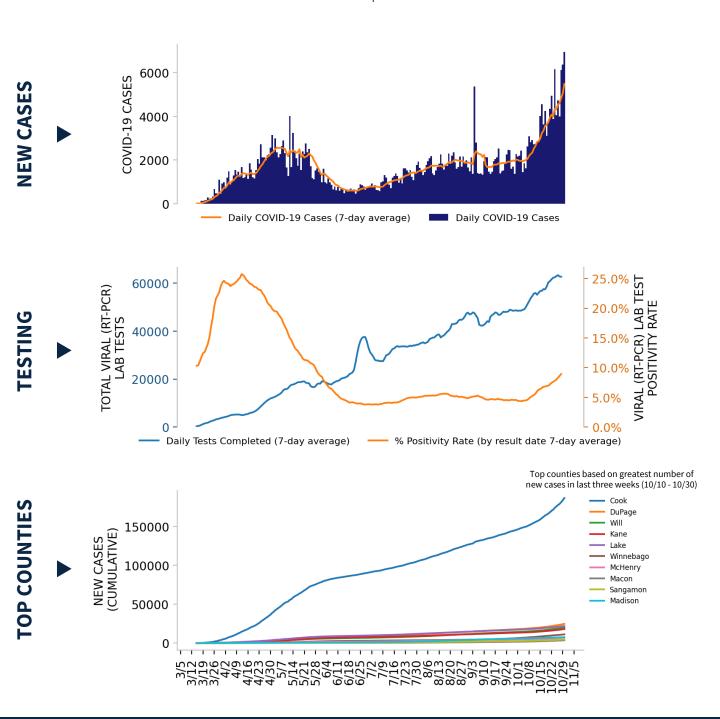
**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 10/28/2020. Previous week is 10/15 - 10/21. **SNFs:** Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 10/25/2020, previous week is 10/12-10/18. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.

<sup>\*</sup> Indicates absolute change in percentage points.

<sup>\*\*</sup> Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.



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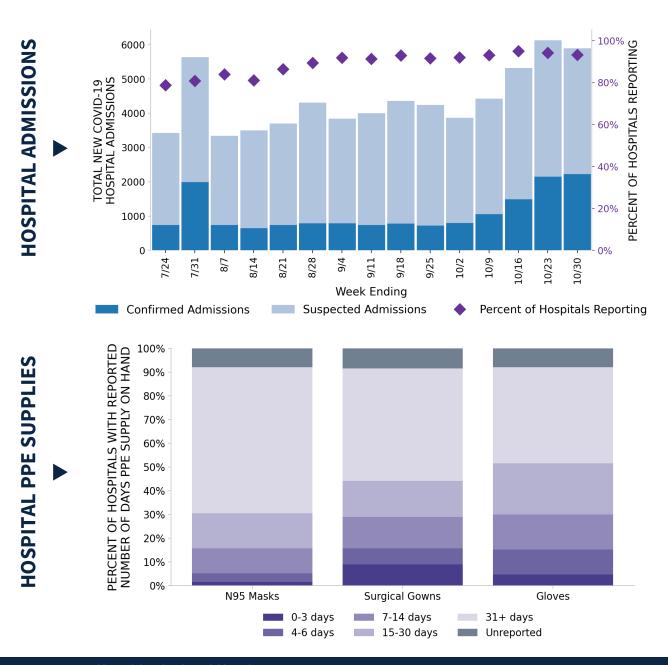
**DATA SOURCES** – Additional data details available under METHODS

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **Cases:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 10/30/2020.



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### 190 hospitals are expected to report in Illinois



DATA SOURCES - Additional data details available under METHODS

**Hospitalizations:** Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure.

**PPE:** Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Values presented show the latest reports from hospitals in the week ending 10/28/2020.



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### COVID-19 COUNTY AND METRO ALERTS\*

Top 12 shown in table (full lists below)

### **METRO AREA (CBSA)**

### **COUNTIES**

LOCALITIES IN RED ZONE	<b>20</b> • (+10)	Chicago-Naperville-Elgin Rockford St. Louis Springfield Decatur Davenport-Moline-Rock Island Carbondale-Marion Quincy Kankakee Sterling Charleston-Mattoon Freeport	<b>49</b> • (+15)	Will Kane Winnebago McHenry Macon Sangamon Madison Rock Island Adams DeKalb Kankakee Kendall
LOCALITIES IN ORANGE ZONE	<b>7</b> ▼ (-2)	Ottawa Danville Galesburg Centralia Macomb Lincoln Paducah	<b>22</b> • (+6)	Cook DuPage Lake St. Clair Tazewell Vermilion Knox Marion Fulton Jackson McDonough Moultrie
LOCALITIES IN YELLOW ZONE	<b>4</b> ▼ (-7)	Peoria Bloomington Pontiac Mount Vernon	<b>19</b> ▼ (-18)	Peoria McLean LaSalle Livingston Woodford Macoupin Jefferson Fayette Montgomery Union Mason Henry
	Change from pre	vious week's alerts:		Stable ▼ Decrease

All Red CBSAs: Chicago-Naperville-Elgin, Rockford, St. Louis, Springfield, Decatur, Davenport-Moline-Rock Island, Carbondale-Marion, Quincy, Kankakee, Sterling, Charleston-Mattoon, Freeport, Rochelle, Dixon, Jacksonville, Effingham, Taylorville, Fort Madison-Keokuk, Burlington, Cape Girardeau

All Red Counties: Will, Kane, Winnebago, McHenry, Macon, Sangamon, Madison, Rock Island, Adams, DeKalb, Kankakee, Kendall, Whiteside, Boone, Stephenson, Clinton, Williamson, Coles, Ogle, Franklin, Douglas, Lee, Randolph, Effingham, Grundy, Morgan, Pike, Shelby, Monroe, Jo Daviess, Carroll, Bureau, Saline, Christian, Warren, Johnson, Mercer, Perry, Hancock, Clay, Washington, Greene, Cumberland, Wabash, Hamilton, Henderson, Alexander, Scott, Putnam

All Orange Counties: Cook, DuPage, Lake, St. Clair, Tazewell, Vermilion, Knox, Marion, Fulton, Jackson, McDonough, Moultrie, Wayne, Bond, Logan, Iroquois, Crawford, Clark, Lawrence, Jasper, Pulaski, Stark

All Yellow Counties: Peoria, McLean, LaSalle, Livingston, Woodford, Macoupin, Jefferson, Fayette, Montgomery, Union, Mason, Henry, Piatt, Ford, De Witt, Cass, Menard, Brown, Massac

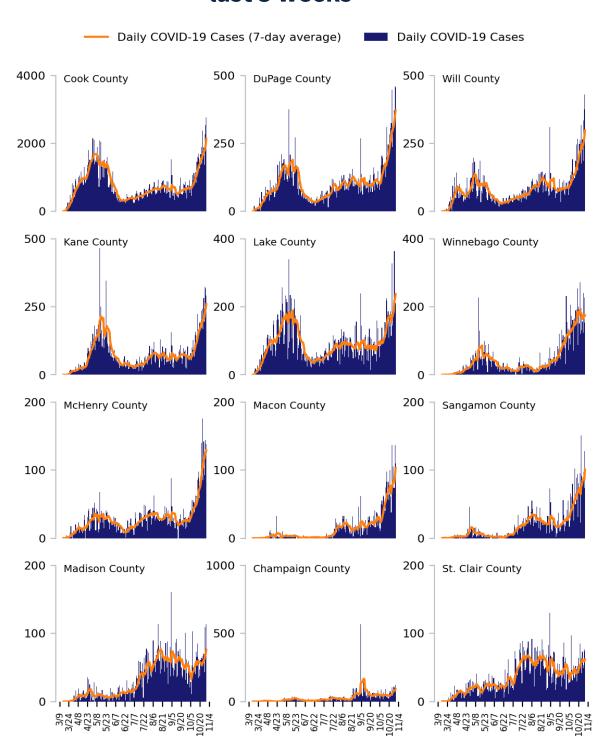
**Note:** Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **DATA SOURCES** – Additional data details available under METHODS

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 10/30/2020.

<sup>\*</sup> Localities with fewer than 10 cases last week have been excluded from these alerts.

COVID-19

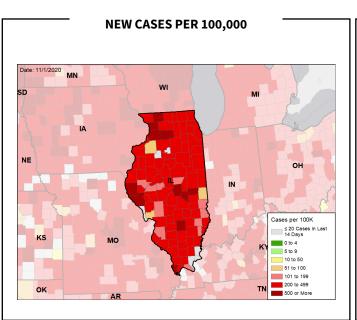
# Top 12 counties based on number of new cases in the last 3 weeks

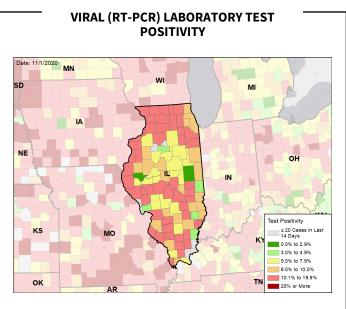


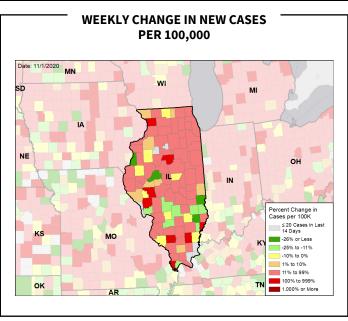


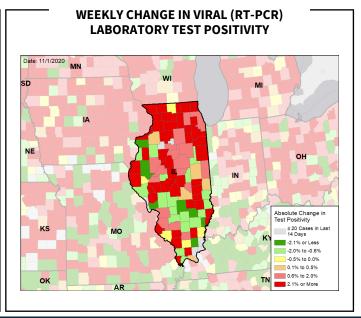
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### CASE RATES AND VIRAL LAB TEST POSITIVITY









**DATA SOURCES** – Additional data details available under METHODS

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **Cases:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 10/30/2020. Previous week is 10/17 - 10/23.



# **National Picture**

### NEW CASES PER 100,000

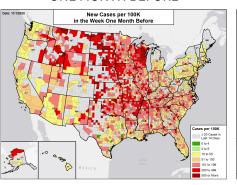
# Date: 11/1/2020 New Cases per 100K Cases per 100K \$ 20 Cases in Last 14 Days 10 to 4 5 to 9 10 to 50 5 to 9 10 to 10 to 199 200 to 499 300 or More

# NATIONAL RANKING OF NEW CASES PER 100,000

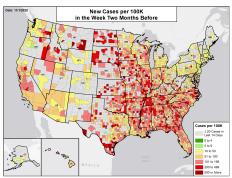
National	National				
Rank	State		Rank	State	
1	ND		27	NC	
2	SD		28	TX	
3	WI		29	WV	
4	MT		30	CT	
5	WY		31	SC	
6	IA		32	FL	
7	AK		33	AL	
8	NE		34	MA	
9	UT		35	NJ	
10	ID		36	PA	
11	KS		37	AZ	
12	IL		38	DE	
13	MN		39	GA	
14	NM		40	VA	
15	IN		41	MD	
16	TN		42	DC	
17	RI		43	CA	
18	KY		44	LA	
19	МО		45	OR	
20	AR		46	NY	
21	CO		47	WA	
22	MI		48	NH	
23	NV		49	HI	
24	OK		50	ME	
25	MS		51	VT	
26	OH				

### NEW CASES PER 100,000 IN THE WEEK:

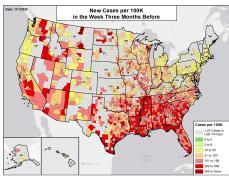
### ONE MONTH BEFORE



### TWO MONTHS BEFORE



### THREE MONTHS BEFORE



### **DATA SOURCES**

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

**Cases:** County-level data from USAFacts through 10/30/2020. The week one month before is 9/26 - 10/2; the week two months before is 8/29 - 9/4; the week three months before is 8/1 - 8/7.



## **National Picture**

### VIRAL (RT-PCR) LAB TEST POSITIVITY

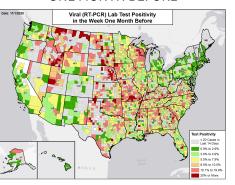
# Date: 11/1/2020 Viral (RT-PCR) Lab Test Positivity Test Positivity 20 Cases in Last 14 Days 0.0% to 2.9% 0.0% to 1.9% 0.0% to 1.9%

# NATIONAL RANKING OF TEST POSITIVITY

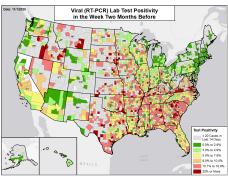
National		National				
Rank	State	Rank	State			
1	MT	27	SC			
2	SD	28	MI			
3	ID	29	СО			
4	UT	30	NC			
5	IA	31	OR			
6	KS	32	AZ			
7	NE	33	FL			
8	WI	34	PA			
9	ND	35	ОН			
10	МО	36	NJ			
11	OK	37	СТ			
12	NV	38	LA			
13	NM	39	MD			
14	TN	40	WV			
15	TX	41	WA			
16	IN	42	CA			
17	MN	43	DE			
18	AL	44	RI			
19	KY	45	NH			
20	MS	46	HI			
21	IL	47	MA			
22	WY	48	NY			
23	AK	49	DC			
24	VA	50	ME			
25	AR	51	VT			
26	GA					

### VIRAL (RT-PCR) LAB TEST POSITIVITY IN THE WEEK:

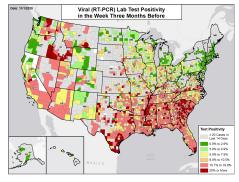
### ONE MONTH BEFORE



### TWO MONTHS BEFORE



### THREE MONTHS BEFORE



### **DATA SOURCES**

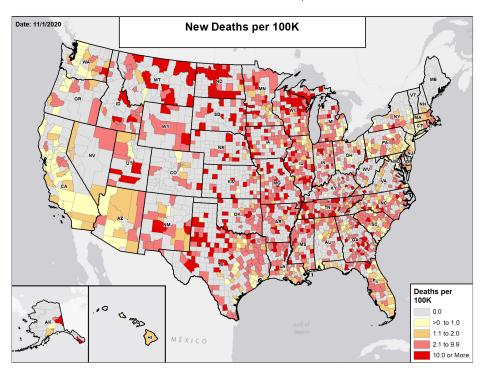
**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

**Testing:** Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 10/28/2020. Tthe week one month before is 9/24 - 9/30; the week two months before is 8/27 - 9/2; the week three months before is 7/30 - 8/5.



## **National Picture**

### NEW DEATHS PER 100,000



# NATIONAL RANKING OF NEW DEATHS PER 100,000

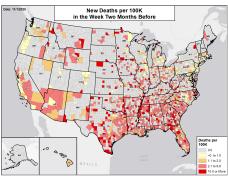
	National		
		MI	
		KY	
	_	AK	
-	-	FL	
		WV	
	_	AL	
	-	NV	
-		PA	
		VA	
		CO	
-		CT	
		UT	
		MD	
		AZ	
		WA	
		OH	
-		NH	
		CA	
		NJ	
		NY	
		HI	
-	_	OR	
		DC	
		ME	
-	51	VT	
	State  ND  MT  SD  WI  TN  AR  MO  ID  WY  MS  IN  NE  IA  DE  SC  IL  OK  RI  NM  MN  MA  NC  LA  TX  GA	ND 27 MT 28 SD 29 WI 30 TN 31 AR 32 MO 33 ID 34 WY 35 MS 36 IN 37 NE 38 IA 39 DE 40 SC 41 IL 42 OK 43 RI 44 NM 45 MN 46 MA 47 NC 48 LA 49 TX 50 GA 51	

### NEW DEATHS PER 100,000 IN THE WEEK:

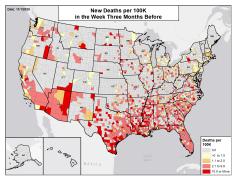
### ONE MONTH BEFORE



### TWO MONTHS BEFORE



### THREE MONTHS BEFORE



### **DATA SOURCES**

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

**Deaths:** County-level data from USAFacts through 10/30/2020. The week one month before is 9/26 - 10/2; the week two months before is 8/29 - 9/4; the week three months before is 8/1 - 8/7.



### **METHODS**

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**COLOR THRESHOLDS:** Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume). Values are rounded before color classification.

Metric	Dark Green	<b>Light Green</b>	Yellow	Orange	Red
New cases per 100,000 population per week	≤4	5 – 9	10 – 50	51 – 100	≥101
Percent change in new cases per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% - 10%	≥11%
Diagnostic test result positivity rate	≤2.9%	3.0% - 4.9%	5.0% - 7.9%	8.0% - 10.0%	≥10.1%
Change in test positivity	≤-2.1%	-2.0%0.6%	-0.5% - 0.0%	0.1% - 0.5%	≥0.6%
Total diagnostic tests resulted per 100,000 population per week	≥2001	1001 – 2000	750 – 1000	500 – 749	≤499
Percent change in tests per 100,000 population	≥26%	11% - 25%	1% - 10%	-10% - 0%	≤-11%
COVID-19 deaths per 100,000 population per week	0.0		0.1 - 1.0	1.1 – 2.0	≥2.1
Percent change in deaths per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% - 10%	≥11%
Skilled Nursing Facilities with at least one resident COVID-19 case, death	0%		1% - 5%		≥6%
Change in SNFs with at least one resident COVID-19 case, death	≤-2%		-1% - 1%		≥2%

### **DATA NOTES**

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- Cases and deaths: County-level data from USAFacts as of 18:13 EST on 11/01/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 10/24 to 10/30; previous week data are from 10/17 to 10/23; the week one month before data are from 9/26 to 10/2.
- Testing: The data presented represent viral COVID-19 laboratory diagnostic and screening test (reverse transcription polymerase chain reaction, RT-PCR) results—not individual people—and exclude antibody and antigen tests, unless stated otherwise. CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe county-level viral COVID-19 laboratory test (RT-PCR) result totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Because the data are deidentified, total viral (RT-PCR) laboratory tests are the number of tests performed, not the number of individuals tested. Viral (RT-PCR) laboratory test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Resulted tests are assigned to a timeframe based on this hierarchy of test-related dates: 1. test date; 2. result date; 3. specimen received date; 4. specimen collection date. Resulted tests are assigned to a county based on a hierarchy of test-related locations: 1. patient residency; 2. provider facility location; 3. ordering facility location; 4. performing organization location. States may calculate test positivity other using other methods. Last week data are from 10/22 to 10/28; previous week data are from 10/15 to 10/21; the week one month before data are from 9/24 to 9/30. HHS Protect data is recent as of 10:22 EST on 11/01/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 10/31/2020.
- Hospitalizations: Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting
  between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly
  identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented
  represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 18:40 EST on 11/01/2020.
- Hospital PPE: Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Data is recent as of 18:58 EDT on 10/31/2020.
- Skilled Nursing Facilities: National Healthcare Safety Network (NHSN). Data report resident and staff cases independently. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analyses. Data presented in this report are more recent than data publicly posted by CMS. Last week is 10/19-10/25, previous week is 10/12-10/18. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.
- County and Metro Area Color Categorizations
  - **Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases at or above 101 per 100,000 population, and a lab test positivity result at or above 10.1%.
  - **Orange Zone:** Those CBSAs and counties that during the last week reported both new cases between 51–100 per 100,000 population, and a lab test positivity result between 8.0–10.0%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
  - **Yellow Zone:** Those CBSAs and counties that during the last week reported both new cases between 10–50 per 100,000 population, and a lab test positivity result between 5.0–7.9%, or one of those two conditions and one condition qualifying as being in the "Orange Zone" or "Red Zone."